aase type a plus sign (+) insid∈ this box U.S. Patent and Trademark ( nder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of inform 09/548.883 **Application Number** TRANSMITTAL April 13, 2000 **Filing Date FORM** Watkins, Michael I. First Named Inventor (to be used for all correspondence after initial filing) Group Art Unit **Examiner Name** Total Number of Pages in This Submission 02558B-061300US 16 Attorney Docket Number ENCLOSURES (check all that apply) After Allowance Communication to Assignment Papers Fee Transmittal Form Group (for an Application) Appeal Communication to Board o Drawing(s) Fee Attached Appeals and Interferences Appeal Communication to Group Licensing-related Papers Amendment / Reply (Appeal Notice, Brief, Reply Brief) Petition Proprietary Information After Final Petition to Convert to a Status Letter Affidavits/declaration(s) Provisional Application Power of Attorney, Revocation Other Enclosure(s) Extension of Time Request See Change of Correspondence Address (please identify below): Fee Transmittal Terminal Disclaimer Return Postcard Express Abandonment Request Request for Refund Information Disclosure Statement CD, Number of CD(s) FEB 2 4 2003 The Commissioner is authorized to charge any Certified Copy of Priority Deposit Account 20-1430. Remarks Document(s) TECH CENTER 1500/2900 Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Townsend and Townsend and Crew LLP Firm and Reg. No. 24,307 oel G. Ackerman Individual name

Signature

Date

O7/07/03

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 2023 on this date:

O2/07/03

Typed or printed name

Nikki Newell

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be send to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

02/07/03

Date

SF 1430689 v1

Signature

oved for use through 10/31/2002. OMB 0651-0032
Patent and mark Office: U.S. DEPARTMENT OF COMMERCE

25, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

No See .	FEE TRANSMITTAL
O THAT	for FY 2003

Under the Paperwork Reduction Act of

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

520

Complete if Known					
Application Number	09/548,883				
Filing Date	April 13, 2000	RECEIVED			
First Named Inventor	Watkins, Michael I.				
Examiner Name	Gabel, G.	FEB 2 4 2003			
Group Art Unit	1641	TOHORISM			
Attorney Docket No.	02558B-063100US	TECH CENTER 1600/2900			

METHOD OF PAYMENT (check all that apply)	- 1		·	FEE C/	ALCULATION (cont	inuea)		
	3. AD	DITION	AL FEES					
	Large	Entity	Small	Entity	•			
Deposit Account:	Fee	Fee	Fee	Fee	Fee De	scription	Fee Paid	
eposit ccount 20-1430	Code 1051	(\$) 130	2051	(\$) . 65	Surcharge - late fil	ing fee or oath		
Number		50	2052	25	Surcharge - late pi			
	1052	••			or cover sheet.			
Deposit Account Name  Townsend and Townsend and Crew LLP		130	1053	130	Non-English speci		<u> </u>	
		2,520	1812	2,520		t for reexamination ation of SIR prior to		
e Commissioner is authorized to: (check all that apply)	1804	920*	1804	920*	Examiner action	ation of SIK phor to	]	
Charge fee(s) indicated below Credit any overpayments		1,840	1805	1,840*	Requesting public	ation of SIR after	· · · · ·	
Charge any additional fee(s) during the pendency of this application		٠.			Examiner action			
Charge fee(s) indicated below, except for the filing fee		110	2251	55 205	Extension for reply	within first month		
the above-identified deposit account.	1252	410	2252	205	month	With in accord	410	
FEE CALCULATION	1253	930	2253	465	Extension for reply	y within third month		
BASIC FILING FEE	1254	1,450	2254	725	Extension for reply	y within fourth		
rge Entity Small Entity	4055	4 070	2255	985	month  Extension for rent	y within fifth month	$\vdash$	
e Fee Fee Fee Description de (\$) Code (\$) Fee Paid	1255 1401	1,970 320		160	Notice of Appeal	,		
ode (\$)   Code (\$)   Fee Patt   01 750   2001   375   Utility filing fee	1402	320	2402	160		pport of an appeal		
02 330 2002 165 Design filing fee	1403	280	2403	140	Request for oral h			
03 520 2003 260 Plant filing fee	1451	1,510	1451	1,510	Petition to Institute	a public use		
004 750 2004 375 Reissue filing fee			4	55	proceeding Petition to revive -	- unavoidable	<del></del>	
005 160 2005 80 Provisional filing fee	1452	110 1,300	2452	650	Petition to revive			
SUBTOTAL (1) (\$)	1501	1,300		650	Utility issue fee (or reissue)			
	1502	470	2502	235	Design issue fee			
EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1503	630	2503	315	Plant issue fee			
Fees from  Evtra Claims below Fee Paid	1460	130	1460	130	Petitions to the Commissioner			
Extra Claims below Fee Paid  Total Claims =		50	1807	50	Petitions related to provisional applications			
dependent alms	1806	180	1806	180	Submission of Inf	ormation Disclosure		
ultiple	8021	40	8021	40 -	per property (time	atent assignment as number of		
ependent	_	. 750	2809	375	properties) Fillog a submission	on after final rejection	,	
arge Entity Small Entity ee Fee Fee Fee Description	1809				(37 CFR § 1.129)	a))		
ode (\$) Code (\$)	. 1810	750	2810	375	examined (37 CF			
202 18 2202 9 Claims in excess of 20 201 84 2201 42 Independent claims in excess of	3 1801	750	2801	375		inued Examination		
203 280 2203 140 Multiple dependent claim, if not i	paid				(RCE)	dited examination	-	
** Reissue Independent claims	1802	900	1802	900	of a design applic			
204 84 2204 *2 over original patent  ** Reissue claims in excess of 2	0 0	r faa lon	ecify) To	rminal Di	•		110	
205 18 2205 9 and over original patent	Othe	Other fee (specify) Terminal Disclosure						
SUBTOTAL (2) (5)	- Red	luced by	Basic Filir	ng Fee P	aid SUBTOTAL (	3) (\$)520		
**or number previously paid, if greater; For Reissues, see above	_ ا							
or infinitely professional prof				===				
SUBMITTED BY					Con	nplete (if applicable)		
Name (Print/Type) Joel G. Ackerman Registration No. (Attorn		mey/Agent) 24,307			Telephone	mplete (if applicable) 415-576-0200 02/07/03		
Signature						02/07/03		
· •	nome public	Credit c	and Inform	nation «	hould not be			
		OI BUIL C	aru 1/11/0//					
WARNING: Information on this form may be	nformation and	d author	ization o	n PTO-20	38.			
WARNING: Information on this form may be included on this form. Provide credit card in Burden Hour Statement: This form is estimated to take 0.2 hours to complete this form should be sent to	nformation and	d author	ization of	n P1U-21	138. eds of the Individua	I case. Any comment	s on the	